

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 01, 1999 8:00 am
Secretary of State

03-01-1999 90138 026 ***150.00

DOCUMENT # F97000004391

1. Corporation Name

INPOWER INC. OF CALIFORNIA

Principal Place of Business

525 MARKET ST., 11TH FLOOR
SAN FRANCISCO CA 94105

Mailing Address

525 MARKET ST., 11TH FLOOR
SAN FRANCISCO CA 94105

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/20/1997

4. FEI Number

68-0359678

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 525 MARKET STREET

2a. Mailing Address

26 525 MARKET STREET

Suite, Apt. #, etc. SUITE #

Suite, Apt. #, etc.

22 1460

27 1460

City & State

23 SAN FRANCISCO CA

City & State

28 SAN FRANCISCO CA

Zip Country

24 94105

Zip Country

29 94105

30

9. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME KELVIN KWOK
STREET ADDRESS 221 HENDERSON #08-01
CITY-ST-ZIP SINGAPORE 94105

TITLE S ☐ DELETE

NAME MORRIS, CRAIG D
STREET ADDRESS 525 MARKET ST., 11TH FLOOR
CITY-ST-ZIP SAN FRANCISCO CA 94105

TITLE D ☐ DELETE

NAME MOO, JOHNNY
STREET ADDRESS 221 HENDERSON #08-01
CITY-ST-ZIP SINGAPORE REPUBLIC OF SINGAP

TITLE D ☐ DELETE

NAME BIN, SEOW C
STREET ADDRESS 221 HENDERSON #08-01
CITY-ST-ZIP SINGAPORE REPUBLIC OF SINGAP

TITLE D ☐ DELETE

NAME TAN, SUNNY
STREET ADDRESS 221 HENDERSON #08-01
CITY-ST-ZIP SINGAPORE REPUBLIC OF SINGAP

TITLE D ☐ DELETE

NAME GREGURAS, FRED
STREET ADDRESS FENWICK & WEST - 2 PALO ALTO SQUARE
CITY-ST-ZIP PALO ALTO CA 94306

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)